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ECONOMIC DEPRESSION AND PELLAGRA INCIDENCE.

The fear expressed by officers of the Public Health Service last fall,¹ that the economic depression was likely to be followed by an increase of pellagra in the summer of 1921, is being realized. Observations and inquiries by officers of the service indicate a markedly increasing prevalence of the disease in many localities. The information at hand is as yet too incomplete to permit of generalization but it seems probable that the number of cases will be more than double what they were last year (1920) in the localities for which information is at hand.

It is evident that economic pressure is producing an unfavorable effect on the diet. The animal foods are being excessively reduced, thus bringing about an unbalanced diet consisting too largely of cereals. Unless this tendency to an unbalancing of the diet is stopped at once by keeping up the supply of milk, cheese, lean meat (fish, fowl, pork), and fresh vegetables, there is serious danger of a return of the alarming conditions experienced in 1915 following the depression resulting from the outbreak of the World War in 1914.

SERIES OF TYPHOID CASES ORIGINATING IN A BACILLUS CARRIER.

In a report from Asst. Surg. Gen. L. L. Williams, at Marine Hospital No. 19, San Francisco, Calif., dated June 16, 1921, an account is given of the occurrence of nine cases of typhoid fever among the members of the crew of the steamship *Lake Gunn*i, which evidently originated in a carrier who was a member of the crew.

The carrier (H. L.), a fireman, was admitted to the hospital for observation on May 30, and the typhoid bacillus was demonstrated in his urine. He informed the medical officer in charge that he had had typhoid fever in New Orleans, where he was discharged from the hospital on April 26, and had shipped on the *Lake Gunn*i on the following day. The nine cases from the vessel were all admitted to the hospital between May 25 and June 6.

The vessel was visited by a medical officer of the Public Health Service, who examined the water and ice with negative results. The information secured from each of the patients suggested no other common source of infection; and so there seems to be little doubt that this group of cases originated in the typhoid bacillus carrier.

¹ Public Health Reports, vol. 35, No. 46, 1920, Reprint No. 621.